

RECEIVED

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION
A PUBLIC DOCUMENT

STATEMENT OF ECONOMIC INTERESTS

Date Received
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COVER PAGE



BY: B. J. H.

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)
Silva James W

1. Office, Agency, or Court

Agency Name

California State Assembly

Division, Board, Department, District, if applicable

67th District

Your Position

State Assemblymember

► If filing for multiple positions, list below or on an attachment.

Agency: _____

Position: _____

RECEIVED
FAIR POLITICAL
PRACTICES COMMISSION
2012 MAR - 1 AM 10:22

2. Jurisdiction of Office (Check at least one box)

☒ State

☐ Judge or Court Commissioner (Statewide Jurisdiction)

☐ Multi-County _____

☐ County of _____

☐ City of _____

☐ Other _____

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2011, through December 31, 2011.

☐ Leaving Office: Date Left _____
(Check one)

-or-

The period covered is _____, through December 31, 2011.

☐ The period covered is January 1, 2011, through the date of leaving office.

☐ Assuming Office: Date assumed _____

☐ The period covered is _____, through the date of leaving office.

☐ Candidate: Election Year _____ Office sought, if different than Part 1: _____

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 8

☒ Schedule A-1 - Investments - schedule attached

☐ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☒ Schedule D - Income - Gifts - schedule attached

☒ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

I certify under penalty of perjury under the laws of the State of California

Date Signed 2-28-12
(month, day, year)

Sign

2)
ov

SCHEDULE A-1

Investments

Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

James W. Silva

<p>NAME OF BUSINESS ENTITY <u>Microsoft</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Technology</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Pfizer</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Pharmaceutical</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>
<p>NAME OF BUSINESS ENTITY <u>Rockwell</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Defense Contractor</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Wal-Mart</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Retail</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>
<p>NAME OF BUSINESS ENTITY <u>Exxon-Mobil</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Oil/Energy</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>	<p>NAME OF BUSINESS ENTITY <u>Kelloggs</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Food</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000 </p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C) </p> <p>IF APPLICABLE, LIST DATE: <u> </u> / <u> </u> / <u>11</u> <u> </u> / <u> </u> / <u>11</u> ACQUIRED DISPOSED </p>

Comments: _____

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

James W. Silva

<p>▶ NAME OF BUSINESS ENTITY <u>Disney</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Entertainment</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Edison International</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Utilities</u></p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input checked="" type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Heinz</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Food</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>IBM</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Technology</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Coca-Cola</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Food/Beverages</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>Alcatel-Lucent</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Communications</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>

Comments: _____

SCHEDULE A-1**Investments****Stocks, Bonds, and Other Interests**

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM 700

FAIR POLITICAL PRACTICES COMMISSION

Name

James W. Silva

<p>▶ NAME OF BUSINESS ENTITY <u>Home Depot</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Retail</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>PepsiCo</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Food/Beverages</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Wyeth</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Insurance</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY <u>AT&T</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Communications</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>
<p>▶ NAME OF BUSINESS ENTITY <u>Boeing</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY <u>Aircraft Manufacturing</u></p> <p>FAIR MARKET VALUE <input checked="" type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input checked="" type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>	<p>▶ NAME OF BUSINESS ENTITY</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY</p> <p>FAIR MARKET VALUE <input type="checkbox"/> \$2,000 - \$10,000 <input type="checkbox"/> \$10,001 - \$100,000 <input type="checkbox"/> \$100,001 - \$1,000,000 <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT <input type="checkbox"/> Stock <input type="checkbox"/> Other _____ (Describe) <input type="checkbox"/> Partnership <input type="radio"/> Income Received of \$0 - \$499 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE: ____/____/11 ____/____/11 ACQUIRED DISPOSED</p>

Comments:

SCHEDULE B
Interests in Real Property
(Including Rental Income)

Name
James W. Silva

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

16199 Gallatin

CITY

Fountain Valley

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / / 11 / / 11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Paul Pham

► ASSESSOR'S PARCEL NUMBER OR STREET ADDRESS

2356 D Linden Way

CITY

Palm Springs

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000
☐ \$10,001 - \$100,000
☒ \$100,001 - \$1,000,000
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

 / / 11 / / 11
ACQUIRED DISPOSED

NATURE OF INTEREST

☒ Ownership/Deed of Trust ☐ Easement

☐ Leasehold _____ ☐ _____
Yrs. remaining Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499 ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☒ \$10,001 - \$100,000 ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Lynn Mills

* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

NAME OF LENDER*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

_____% ☐ None

TERM (Months/Years)

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000 ☐ \$1,001 - \$10,000
☐ \$10,001 - \$100,000 ☐ OVER \$100,000
☐ Guarantor, if applicable

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700
FAIR POLITICAL PRACTICES COMMISSION

Name

James W. Silva

► NAME OF SOURCE

John Wayne Airport

ADDRESS (Business Address Acceptable)

3160 Airway Avenue, Costa Mesa, CA 92626

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Airport

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 01 / 11	\$ 420.00	parking pass
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

City of Huntington Beach

ADDRESS (Business Address Acceptable)

2000 Main St., Huntington Beach, CA 92648

BUSINESS ACTIVITY, IF ANY, OF SOURCE

City/Local Government

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 01 / 11	\$ 200.00	parking passes
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Gaming, Building and Telecommunications Entities

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Gaming, Building and Telecommunications Entities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 11 / 11	\$ 66.28	reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

California Agricultural Leadership Foundation

ADDRESS (Business Address Acceptable)

425 W. Blanco Rd., Salinas, CA 93908

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Agriculture

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
01 / 26 / 11	\$ 53.00	reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

Council for Legislative Excellence

ADDRESS (Business Address Acceptable)

2150 River Plaza Dr, Ste 150 Sacramento, CA 95833

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Government and Public Administration

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 08 / 11	\$ 75.45	dinner
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

► NAME OF SOURCE

California New Car Dealers Association

ADDRESS (Business Address Acceptable)

1415 L St., Sacramento, CA 95814

BUSINESS ACTIVITY, IF ANY, OF SOURCE

Auto Sales

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
03 / 29 / 11	\$ 107.52	dinner and reception
___ / ___ / ___	\$ _____	_____
___ / ___ / ___	\$ _____	_____

Comments: _____

SCHEDULE D Income – Gifts

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION Name James W. Silva

► NAME OF SOURCE
Edison International

ADDRESS (Business Address Acceptable)
2244 Walnut Grove Ave., Rosemead, CA 91770

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Energy/Utilities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
02 / 01 / 11	\$ 98.00	ticket
03 / 02 / 11	\$ 26.14	dinner
05 / 31 / 11	\$ 200.00	ticket

► NAME OF SOURCE
Edison International

ADDRESS (Business Address Acceptable)
2244 Walnut Grove Ave., Rosemead, CA 91770

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Energy/Utilities

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
12 / 20 / 11	\$ 13.88	key chain/picture frame
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE
City of Hope

ADDRESS (Business Address Acceptable)
1500 East Duarte Rd., Duarte, CA 91010

BUSINESS ACTIVITY, IF ANY, OF SOURCE
Health Care

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
09 / 17 / 11	\$ 375.00	tickets/dinner
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

► NAME OF SOURCE

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF SOURCE

DATE (mm/dd/yy)	VALUE	DESCRIPTION OF GIFT(S)
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____
____ / ____ / ____	\$ _____	_____

Comments: _____

FPPC Form 700 Attachment

The filer, James W. Silva, has made a good faith effort to identify, value and report all gifts, tickets, travel payments, beverages, meals and reimbursements related to travel in connection with speeches, panels, seminars, receptions or other, similar events received during the calendar year 2011.

The filer has implemented a policy to track carefully events at which the filer was provided meals or other benefits as well as events at which the filer did not consume meals or beverages. The filer has relied in part for this tracking system upon the persons and entities providing the gifts, tickets or benefits to provide confirmation of the event and valuation of the gifts and benefits. Any omission from the gifts and travel reimbursements listed herein is unintended and inadvertent.

Name: James W Silva Date: 2-28-12

Signature:

(c)(1)

A rectangular box with a black border, filled with a solid gray color, used to redact the signature. The text "(c)(1)" is printed in blue in the top-left corner of the box.